

U.S. District Court for the Northern District Of Illinois

Attorney Appearance Form

Case Title: In re: Multiplan Health
Insurance Provider

Case Number: 1:24-cv-06795

An appearance is hereby filed by the undersigned as attorney for:

United States of America

Attorney name (type or print): Henry J. Hauser

Firm: United States Department of Justice

Street address: 950 Pennsylvania Avenue NW

City/State/Zip: Washington, D.C. 20530-0001

Bar ID Number: 57046
(See item 3 in instructions)

Telephone Number: 202-975-8352

Email Address: Henry.Hauser@usdoj.gov

Are you acting as lead counsel in this case? ☒ Yes ☐ No

Are you a member of the court's general bar? ☐ Yes ☒ No

Are you a member of the court's trial bar? ☐ Yes ☒ No

Are you appearing *pro hac vice*? ☐ Yes ☒ No

If this case reaches trial, will you act as the trial attorney? ☐ Yes ☒ No

If this is a criminal case, check your status.

- ☐ Retained Counsel
☐ Appointed Counsel
If appointed counsel, are you a
☐ Federal Defender
☐ CJA Panel Attorney

In order to appear before this Court an attorney must either be a member in good standing of this Court's general bar or be granted leave to appear *pro hac vice* as provided for by local rules 83.12 through 83.14. I declare under penalty of perjury that the foregoing is true and correct. Under 28 U.S.C. §1746, this statement under perjury has the same force and effect as a sworn statement made under oath.

Executed on March 25, 2025

Attorney signature: S/ Henry J. Hauser

(Use electronic signature if the appearance form is filed electronically.)